

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	m - G		11/5/00
O.I.P.E. CLASSIFIER		59	11/30/00
FORMALITY REVIEW		70611	2/2/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected H _____ Non-elected
 = _____ Allowed I _____ Interference
 - (Through numeral) - Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date
1	11/5/00
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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